

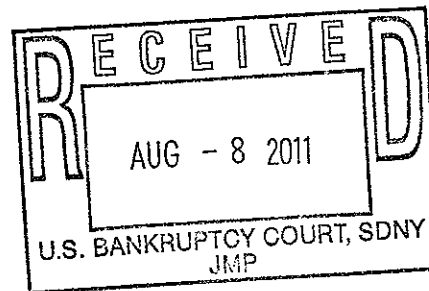
Luxembourg, 5 August 2011

Lehman Brothers Holdings Claims Processing Center
c/o Epiq Bankruptcy Solutions, LLC
757, Third Avenue, 3rd Floor
USA – New York, NY 10017

Copy to

The chambers of the Honorable James M. Peck,
One Bowling Green,
USA – New York, NY – 10004
Courtroom 601

Weil, Gotthal & Manges LLP
Attn Mr Robert J. Lemons
767, Fifth Avenue
USA – New York, NY 10153



The Office of the United States Trustee for Region 2,
Attn Ms Tracy Hope Davis
33 Whitehall Street, 21 st Floor,
USA – New York, NY 10004

Attorneys for the official committee of unsecured creditors
Milbank, Tweed, Hadley & Mc Cloy LLP
Attn Mr Dennis F. Dunne
1, Chase Manhattant Plaza
USA – New York, 10005

By courier

Re: My proof of claim Lehman Brothers Holding Inc., Chapter 11 case no 08-13555, sent by courier on 13 October, 2009, erroneously treated and/or registered as a Late Filed Claim on Exhibit A of the Debtor's One Hundred Fifty-Eight Omnibus Objection to Claims (Late Filed Claims)

Dear Madam, Sir,

This is in reply to the US Bankruptcy Court Order dated 11 July, 2011 in abovementioned case.

Please take notice that I herewith object to my proof of claim being treated and/or registred as a Late Filed Claim.

I herewith request you to confirm to me that my proof of claim is or will be accepted, treated and registered as a Claim, in accordance with the Bar Date Order.

In effect, it shows from the Proof of Claim Form that I filled in and signed the form on the 13 October, 2009. It furthermore shows from information and the shipping bill obtained from the courier DHL that this Proof of Claim Form was effectively delivered at the address 757, Third Avenue, 3rd floor New York 10017 on 19 October, 2009.

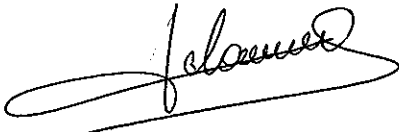
It is therefore by mistake that EPIQ Bankruptcy Solutions stamped the Proof of Claim Form only on 12 May, 2010.

I did send a second (copy) Proof of Claim in May 2010, but that was because at that time I had still not received an acknowledgement of receipt of my Proof of Claim from EPIQ Bankruptcy Solutions. Since they informed me that I could file a proof of Claim at any time, and in order to facilitate the administrative process, I did send a second (copy) Proof of Claim.

Please find attached copy of all underlying and justifying documents (i Shipping bill and information obtained from courier DHL; ii Proof of Claim filled in and signed on 13 October 2009; iii second (copy) Proof of Claim).


I remain at your disposal for any further information that you may require.

Yours sincerely,

A handwritten signature in black ink, appearing to read 'Detournay', with a large, sweeping underline.

Pierre Detournay
20A, bv Emmanuel Servais
L - 2535 Luxembourg

Ammex i

DHL		ARCHIVE COPY	
NOT TO BE ATTACHED TO SHIPMENT			
FROM : MD Joanne Degrave nd nd L-2951 , Luxembourg , LU		Acc nr: DHL 36705479 ORIGIN: LUX	
TO: Lehman Brothers Holdings Claims Processin Epig Bankruptcy Solutions, LLC FDR Station, PO Box 5076 10150 , New York ,		Tel: 000000	
Time			
Date : 19/10/2009		Weight : 0.50 Kg	
Destination : ZYP		Product : DOX	
Pieces : 1		Service : DDU	
Description : Document			
Shipment Number : 9544186551			
Sender's Ref :			
Sender's VAT : 000000			
Sender's Phone :			
Bill to Account :			
Customs Value : 0.00 EUR		Extra Charges :	
Imp/Exp Type : Permanent			
Insurance Value : DDU			
Terms of Trade :			
Reason for Export :			
Dimensions (cm) : L: 0 W: 0 H: 0			
Weight (cust; act; vol) : 0.50 Kg; ****, 0.50 Kg			
Pick-up : 18:04 19/10/2009 LU01-B			
AIRWAYBILL: 9544186551			
			

SPS Core 5 15/4/2005

DEGRAVE JOANNE

From: Claude Seiwert (DHL LU) [Claude.Seiwert@dhl.com]
Sent: jeudi 4 août 2011 12:35
To: DEGRAVE JOANNE
Subject: recherche sur votre envoi 9544186551 en date du 19/08/2009
Attachments: 4f01c724-47ec-4f6c-ae5b-ca924a773aee_COLD_71871840_1_1.pdf

***** This message comes from the Internet Network *****

Bonjour Mme. Degrave,

En annexe je vous envoie le bordereau de votre envoi.

Cet envoi a bien été délivré à l'adresse

Lehman Brothers Holdings Claims Processing
Epiq Bankruptcy Solutions, LLC
FDR Station, PO Box 5076

L'adresse sous la quelle cette P.O. devrait être enregistrée est la suivante :

Epiq Bankruptcy Solutions, LLC
Attn: Hoop Holdings, LLC Claims Processing Center
757 Third Avenue, 3rd Floor
New York, NY 10017

Ainsi je peux aussi vous confirmer que un certain M. PORTERa signé le 21 octobre 2009 pour la réception de votre envoi.

Cordialement

Claude Seiwert
Customer Service Department
Customer Service Agent

DHL Express (Luxembourg) S.A.
11A, Rue Edmond Reuter
L - 5326 Contern
Luxembourg

Phone : +352 355 355 - 210
Fax : +352 355 350

claude.seiwert@dhl.com
www.dhl.com

GOGREEN – Climate Protection with DHL
Please consider your environmental responsibility before printing this E-mail.

DHL: Corporate - Package Tracking Results

Page 1 of 1

These are the results of your query

Times given are local to the service area in which the shipment checkpoint is recorded

Airwaybill Number	Origin Service Area	Destination Service Area	Status
----------------------	------------------------	--------------------------------	--------

9544186551

Luxembourg -
Luxembourg

New York -

Signed for by: M PORTER
Shipment delivered October 21, 2009

10:36 ✓

Lehman Brothers

9544186551 - Detailed Report

Date	Time	Location Service Area	Checkpoint Details
October 20, 2009	17:19	Luxembourg - Luxembourg	Shipment picked up
October 20, 2009	19:02	Luxembourg - Luxembourg	Departing origin
October 20, 2009	20:43	Luxembourg - Luxembourg	Processed at Luxembourg - Luxembourg
October 20, 2009	21:02	Luxembourg - Luxembourg	Departed from DHL facility in Luxembourg - Luxembourg
October 20, 2009	21:13	Luxembourg - Luxembourg	Arrived at DHL facility in Luxembourg - Luxembourg
October 20, 2009	22:49	Luxembourg - Luxembourg	Departed from DHL facility in Luxembourg - Luxembourg
October 21, 2009	00:31	Leipzig - Germany	Processed at Leipzig - Germany
October 21, 2009	03:13	Leipzig - Germany	Departed from DHL facility in Leipzig - Germany
October 21, 2009	05:32	New York City-Gateway, NY - USA	Arrived at DHL facility in New York City-Gateway, NY - USA
October 21, 2009	05:54	New York City-Gateway, NY - USA	Processed at New York City-Gateway, NY - USA
October 21, 2009	06:48	New York City-Gateway, NY - USA	Processed at New York City-Gateway, NY - USA
October 21, 2009	06:50	New York City-Gateway, NY - USA	Departed from DHL facility in New York City-Gateway, NY - USA
October 21, 2009	07:41	New York -	Arrived at DHL facility
October 21, 2009	09:03	New York -	With delivery courier
October 21, 2009	10:36	New York -	Shipment delivered

Détails de livraison AWB 9544186551

Page 1 of 1

MICHIELS AN

From: Frederic LAVILLE (DHL LU) [frederic.laville@dhl.com]
Sent: vendredi 12 février 2010 11:09
To: MICHIELS AN
Subject: Détails de livraison AWB 9544186551

***** This message comes from the Internet Network *****

Bonjour Mme Michiels,

Comme promis vous trouverez ci-dessous les détails concernant l'envoi sus-mentionné.

Bonne journée et bon weekend,

Cordialement
Fred

AWB # 9544186551 - Origin : LUX - Dest : ZYP - Prod : D				DELIVERED	
Shipper	ND - 367054791 (Tel.)				
Description	Ref. : - Content : Document				
Consignee	Lahman Brothers Hb (Tel.)				
Pickup	19.10.2009 on route : LU01				
Delivery	21.10.2009 - 10:36 signed by : M PORTER				
Pieces	SD	1	Balance	-> Billing	Billing
Weight	SD	0,50	Balance	-> Billing	Billing

Pc	Balance	Volumetric	Dimensions
1	0,04 kg	0,00 kg	x x cm

VOLUMETRIC

Frederic Laville
Customer Service Department
K.A.D. - Customer Service Executive

DHL Express (Luxembourg) S.A.
11A, Rue Edmond Reuter
L - 5326 Contern
Luxembourg

Phone : +352 355 355 - 205
Fax : +352 355 355 - 489

frederic.laville@dhl.com
www.dhl.com

GOGREEN - Climate Protection with DHL
Please consider your environmental responsibility before printing this E-mail.

envelope par DHL le 20/10/09

United States Bankruptcy Court/Southern District of New York Lehman Brothers Holdings Claims Processing Center c/o Epiq Bankruptcy Solutions, LLC FDR Station, P.O. Box 5076 New York, NY 10150-5076		LEHMAN SECURITIES PROGRAMS PROOF OF CLAIM	
In Re: Lehman Brothers Holdings Inc., et al., Debtors.	Chapter 11 Case No. 08-13555 (JMP) (Jointly Administered)	THIS SPACE IS FOR COURT USE ONLY	
Note: This form may not be used to file claims other than those based on Lehman Programs Securities as listed on http://www.lehman-docket.com as of July 17, 2009			
Name and address of Creditor: (and name and address where notices should be sent if different from Creditor) DETOURNEY PIERRE COA B² EMMANUEL SERVAIS L2535 LUXEMBOURG 00362 335339		<input type="checkbox"/> Check this box to indicate that this claim amends a previously filed claim.	Court Claim Number: _____ (If known)
Telephone number: _____ Email Address: detournp@pt.lu		Filed on: _____	
Name and address where payment should be sent (if different from above)		<input type="checkbox"/> Check this box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.	
Telephone number: _____ Email Address: detournp@pt.lu			
1. Provide the total amount of your claim based on Lehman Programs Securities. Your claim amount must be the amount owed under your Lehman Programs Securities as of September 15, 2008, whether you owned the Lehman Programs Securities on September 15, 2008 or acquired them thereafter, and whether such claim matured or became fixed or liquidated before or after September 15, 2008. The claim amount must be stated in United States dollars, using the exchange rate as applicable on September 15, 2008. If you are filing this claim with respect to more than one Lehman Programs Security, you may attach a schedule with the claim amounts for each Lehman Programs Security to which this claim relates. Amount of Claim: \$ 14394,- (Required) <input type="checkbox"/> Check this box if the amount of claim includes interest or other charges in addition to the principal amount due on the Lehman Programs Securities.			
2. Provide the International Securities Identification Number (ISIN) for each Lehman Programs Security to which this claim relates. If you are filing this claim with respect to more than one Lehman Programs Security, you may attach a schedule with the ISINs for the Lehman Programs Securities to which this claim relates. International Securities Identification Number (ISIN): X50169028700 (Required)			
3. Provide the Clearstream Bank Blocking Number, a Euroclear Bank Electronic Reference Number, or other depository blocking reference number, as appropriate (each, a "Blocking Number") for each Lehman Programs Security for which you are filing a claim. You must acquire a Blocking Number from your accountholder (i.e. the bank, broker or other entity that holds such securities on your behalf). If you are filing this claim with respect to more than one Lehman Programs Security, you may attach a schedule with the Blocking Numbers for each Lehman Programs Security to which this claim relates. Clearstream Bank Blocking Number, Euroclear Bank Electronic Instruction Reference Number and or other depository blocking reference number: CA 06024 (Required)			
4. Provide the Clearstream Bank, Euroclear Bank or other depository participant account number related to your Lehman Programs Securities for which you are filing this claim. You must acquire the relevant Clearstream Bank, Euroclear Bank or other depository participant account number from your accountholder (i.e. the bank, broker or other entity that holds such securities on your behalf). Beneficial holders should not provide their personal account numbers. Accountholders Euroclear Bank, Clearstream Bank or Other Depository Participant Account Number: 73658 (Required)			
5. Consent to Euroclear Bank, Clearstream Bank or Other Depository: By filing this claim, you consent to, and are deemed to have authorized, Euroclear Bank, Clearstream Bank or other depository to disclose your identity and holdings of Lehman Programs Securities to the Debtors for the purpose of reconciling claims and distributions.		<div style="border: 2px solid black; padding: 5px; text-align: center;">FILED / RECEIVED MAY 12 2010 EPIQ BANKRUPTCY SOLUTIONS, LLC</div>	
Date: 13/10/2009	Signature: The person filing this claim must sign it. Sign and print name and title, if any, of the creditor or other person authorized to file this claim and state address and telephone number if different from the notice address above. Attach copy of power of attorney, if any. detournp		
Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571			

INSTRUCTIONS FOR PROOF OF CLAIM FORM

The questions on the Proof of Claim form include instructions for completing each question. The instructions and definitions below are general explanations of the law. In certain circumstances, such as bankruptcy cases not filed voluntarily by the debtor, there may be exceptions to these general rules.

Creditor's Name and Address:

Fill in the name of the person or entity asserting a claim and the name and address of the person who should receive notices issued during the bankruptcy case. A separate space is provided for the payment address if it differs from the notice address. The creditor has a continuing obligation to keep the court informed of its current address. See Federal Rule of Bankruptcy Procedure (FRBP) 2002(g).

Date and Signature:

The person filing this proof of claim must sign and date it. FRBP 9011. Print the name and title, if any, of the creditor or other person authorized to file this claim. State the filer's address and telephone number if it differs from the address given on the top of the form for purposes of receiving notices. Attach a complete copy of any power of attorney. Criminal penalties apply for making a false statement on a proof of claim.

DEFINITIONS

Debtor

A debtor is the person, corporation, or other entity that has filed a bankruptcy case.

Creditor

A creditor is the person, corporation, or other entity owed a debt by the debtor on the date of the bankruptcy filing.

Claim

A claim is the creditor's right to receive payment on a debt that was owed by the debtor on the date of the bankruptcy filing. See 11 U.S.C. §101 (5). A claim may be secured or unsecured, reduced to judgment or not, liquidated or unliquidated, fixed, contingent, matured, unmatured, disputed, undisputed, legal or equitable

Proof of Claim

A proof of claim is a form used by the creditor to indicate the amount of the debt owed by the debtor on the date of the bankruptcy filing. The creditor must file the form with the Claims Agent at the following address:

Lehman Brothers Holdings Claims Processing
c/o Epiq Bankruptcy Solutions, LLC
FDR Station, PO Box 5076
New York, NY 10150- 5076

Lehman Programs Security

Any security included on the list designated "Lehman Programs Securities" available on <http://www.lehman-docket.com> as of July 17, 2009.


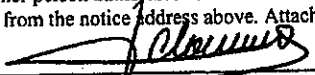
INFORMATION

Acknowledgment of Filing of Claim

To receive acknowledgment of your filing, you may either enclose a stamped self-addressed envelope and a copy of this proof of claim, or you may access the Claims Agent's system (<http://www.lehman-docket.com>) to view your filed proof of claim.

Offers to Purchase a Claim

Certain entities are in the business of purchasing claims for an amount less than the face value of the claims. One or more of these entities may contact the creditor and offer to purchase the claim. Some of the written communications from these entities may easily be confused with official court documentation or communications from the debtor. These entities do not represent the bankruptcy court or the debtor. The creditor has no obligation to sell its claim. However, if the creditor decides to sell its claim, any transfer of such claim is subject to FRBP 3001(e), any applicable provisions of the Bankruptcy Code (11 U.S.C. § 101 *et seq.*), and any applicable orders of the bankruptcy court.

United States Bankruptcy Court/Southern District of New York Lehman Brothers Holdings Claims Processing Center c/o Epiq Bankruptcy Solutions, LLC FDR Station, P.O. Box 5076 New York, NY 10150-5076		LEHMAN SECURITIES PROGRAMS PROOF OF CLAIM	
In Re: Lehman Brothers Holdings Inc., et al., Debtors.	Chapter 11 Case No. 08-13555 (JMP) (Jointly Administered)	Filed: USBC - Southern District of New York Lehman Brothers Holdings Inc., Et Al. 08-13555 (JMP) 0000066608 	
Note: This form may not be used to file claims other than those based on Lehman Programs Securities as listed on http://www.lehman-docket.com as of July 17, 2009			
Name and address of Creditor: (and name and address where notices should be sent if different from Creditor) DETOURNAY PIERRE 20 A, Bd EMMANUEL SERVAIS L - 2535 LUXEMBOURG Telephone number: 00352 335 339 Email Address: detournay@pt.lu		<input type="checkbox"/> Check this box to indicate that this claim amends a previously filed claim. Court Claim Number: _____ (If known) Filed on: _____	
Name and address where payment should be sent (if different from above) Telephone number: _____ Email Address: _____		<input type="checkbox"/> Check this box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.	
1. Provide the total amount of your claim based on Lehman Programs Securities. Your claim amount must be the amount owed under your Lehman Programs Securities as of September 15, 2008, whether you owned the Lehman Programs Securities on September 15, 2008 or acquired them thereafter, and whether such claim matured or became fixed or liquidated before or after September 15, 2008. The claim amount must be stated in United States dollars, using the exchange rate as applicable on September 15, 2008. If you are filing this claim with respect to more than one Lehman Programs Security, you may attach a schedule with the claim amounts for each Lehman Programs Security to which this claim relates. Amount of Claim: \$ 14321- (Required) <input type="checkbox"/> Check this box if the amount of claim includes interest or other charges in addition to the principal amount due on the Lehman Programs Securities.			
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3. Provide the Clearstream Bank Blocking Number, a Euroclear Bank Electronic Reference Number, or other depository blocking reference number, as appropriate (each, a "Blocking Number") for each Lehman Programs Security for which you are filing a claim. You must acquire a Blocking Number from your accountholder (i.e. the bank, broker or other entity that holds such securities on your behalf). If you are filing this claim with respect to more than one Lehman Programs Security, you may attach a schedule with the Blocking Numbers for each Lehman Programs Security to which this claim relates. Clearstream Bank Blocking Number, Euroclear Bank Electronic Instruction Reference Number and or other depository blocking reference number: CA06024 (Required)			
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5. Consent to Euroclear Bank, Clearstream Bank or Other Depository: By filing this claim, you consent to, and are deemed to have authorized, Euroclear Bank, Clearstream Bank or other depository to disclose your identity and holdings of Lehman Programs Securities to the Debtors for the purpose of reconciling claims and distributions.		<div style="border: 2px solid black; padding: 10px; width: fit-content; margin: 0 auto;"> FOR COURT USE ONLY FILED / RECEIVED MAY 12 2010 EPB BANKRUPTCY SOLUTIONS, LLC </div>	
Date: 6/05/2010	Signature: The person filing this claim must sign it. Sign and print name and title, if any, of the creditor or other person authorized to file this claim and state address and telephone number if different from the notice address above. Attach copy of power of attorney, if any. 		
Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571			

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Date and Signature:

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